

USNH
St Albans
[1944]

The differential diagnosis of Malaria.

It is frequently of great importance that the clinician be aware of the species of *Plasmodium* that is the etiologic agent in a case of malaria. While clinical signs are usually diagnostic, the presence of *P. falciparum* is sometimes detectable only ⁱⁿ the laboratory, information which is important because of the frequently fulminant, malignant character of the malaria caused by this organism. There are 3 well-recognized species:

P. vivax, *P. malariae* and *P. falciparum*, and the technician should possess a good working knowledge of their distinctive characteristics. The following summary may be helpful:

The possibility of mixed infections should never be overlooked, so that the identification of one species in a blood specimen does not exclude the presence of others. Generally, one species will be greatly predominant.

It is assumed that the reader is familiar with the terminology and the life cycle of *Plasmodium*.

Cases where ring-forms only seem to be present, or where there is strong suggestion of *P. falciparum* call for repeat smears. These should be done about 40-44 hours after ~~last~~ ^{previous} reported chill or agony. This is less important, but should not be neglected if a previous